. •									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10782496.				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR'	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			21					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			29 minus 20=		* g			X\$ 9=		OR	X\$18=	162	
INDEPENDENT CLAIMS			minus 3 =		* 9		X43=			OR	X86=	172	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR		110	
* If	the difference	e in column 1 is	less than zero, enter "0"						-	┥		1104	
								UTAL	· L	OR	TOTAL	/ - /_	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	EST BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		<43=		3,5	X86=		
۷	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM				 	OR		;	
							+	145=		OR	+290=		
								TOTAL DIT. FE		OR	TOTAL ADDIT. FEE		
_	•	(Column 1)	1	(Colun		(Column 3)					* # ****		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	R	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	(43=		OR	X86=		
۷	FIRST PRESE	JLTIPLE DEF	PENDENT					Un					
	Lance to the second							145= TOTAL		OR	+290=		
										OR ,	TOTAL ADDIT. FEE		
7		(Column 1)		(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PREȘENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOZ	Total ·	*	Minus	**		= , ,	X	\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X	43=			X86=		
۷	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		·	,,,,		OR			
A KIN A STATE OF THE STATE OF T										OR	+290=		
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE		
7	The "Highest Num	mber Previously Paid ber Previously Paid	d For" (Total or	Independe	nt) is the	highest number	found in	n the ap	propriate box	in col	ımn 1.		